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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application of Docke Nambe		
APPLICATION AS FILED - (Column 1)					- PART I (Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR	NU	NUMBER FILED		NUMBER EXTRA		RATE (\$) FEE (\$)			RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))		:))								1		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			<del></del>		· ·	1				1	·-	
EXAMINATION FEE		i				١				1		
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS		3))			<del></del>	1		-		1		
(37 CFR 1.16(i)) INDEPENDENT CLAIMS		MS .	minus 2	20 = *	<del></del>	1	Х	=		OR	X =	
(37 CFR 1.16(h))			minus	l,			х	=		Į	X =	
FEE	LICATION SIZE	sheets is \$25 additio	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									·
MUL	TIPLE DEPENDE	NT CLAIM PF	ESENT (37	CFR 1.16(j))								
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTA	ıL		]	TOTAL	
(Column 2) (Column 3)							SMALL ENTITY			OR	OTHER THAN SMALL ENTITY	
VT A		CLAIMS REMAINING AFTER AMENDMEN	;	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1.16(i)) Independent	<u>: حن</u>	Minus	3/	= 7		х	=		OR	x =	
Z	(37 CFR 1.16(h))			1			X	=		OR	x =	
AM	Application Size Fee (37 CFR 1.16(s))								+	$\mathbf{I}$		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									/	OR		
							TOTAL ADD'L F	EE/		OR	TOTAL ADD L FEE	
	····································	(Column 1)		(Column 2)	(Column 3)					,	,	
NT B		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ME	Total (37 CFR 1.16(i))	•	Minus	**	=		х	=		OR	x =	
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	***	=		x	=		OR	х =	
ME	Application Size Fee (37 CFR 1.16(s))									] "		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
							TOTAL ADD'L F	EE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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